

<div>Commonwealth of Kentucky Natural Resources and Environmental Protection Cabinet Division for Air Quality 803 Schenkel Lane Frankfort, Kentucky 40601-1403 (502) 573-3382 FAX 573-3787</div> <div>APPLICATION FOR ASBESTOS CERTIFICATION (CONTRACTORS OR FACILITIES)</div> <p>The proper completion and return of this form is required for entity certification under 401 KAR 58:040. To be considered a complete application all requested information must be provided on this form, and the form must be signed by an authorized company officer, and accompanied by the required certification fee in the form of a <b>certified check or money order payable to Kentucky State Treasurer</b>. Failure to supply accurate information required by the Division to enable it to act upon the application may result in denial of certification.</p>	DEP-7034	Rev. 1-98
	DIVISION USE ONLY	
	RECEIPT NUMBER:	
	CERTIFICATE NUMBER:	
RECEIVED:		

COMPANY NAME:	TELEPHONE: (      )		
NAME OF OWNER OR COMPANY OFFICIAL: Mr./Ms.			
MAILING ADDRESS: <i>Street or P.O. Box</i>			
City _____ State _____ Zip Code _____			
Total Fee for Initial Certification is \$500.00. (Includes \$100.00 filing fee.)			
Total Fee for Certification Renewal is \$250.00. (Includes \$50.00 filing fee.)			
No Fee for Certification Modification			
Fees for certification should <u>not</u> be combined in a single check with fees for other programs, such as accreditation.			
ASBESTOS CERTIFICATION DESIRED	Initial <input type="checkbox"/>	Renewal <input type="checkbox"/>	Modification <input type="checkbox"/>
<i>Copy of certificate, letter, or other proof, verifying completion of an EPA-approved training course and that a passing [70%] score was achieved on the accompanying test must be attached for all persons to be listed on the certificate.</i>			
I hereby acknowledge that I have read and understand this application and hereby swear or affirm that the contents of this application are true and correct to the best of my belief and knowledge. I acknowledge that I will be subject to the penalties for perjury for false statements contained in this application.			
SIGNATURE: _____ Owner or Company Official		_____ Date	